



UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Martinelli Examiner: Shaw, S. J.  
Serial Number: 09/494,213 Art Unit: 3737  
Filing Date: January 24, 2000  
Title: Method and System for Navigating a Catheter Probe  
Docket Number: MRTK-001RECON (56300-036)

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on the date set forth below.

September 12, 2002  
Date of Signature  
and of Mail Deposit

By Erin Shea

Erin Shea

Assistant Commissioner For Patents  
Washington, DC 20231

Sir:

**TRANSMITTAL LETTER**

Applicants enclose herewith for filing in connection with the above-referenced patent application the following documents:

1. Amendment Transmittal Letter (Large Entity);
2. Amendment "A";
3. Supplemental Reissue Application Declaration;
4. Copy of Petition for Correction of Inventorship of Patent;
5. Assignee Certified Under 37 C.F.R. § 3.73 (b)
6. Three Month Extension of Time;
7. Check for \$ \$920 (Three Month Extension Fee); and
8. Acknowledgement postcard.

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No additional costs are believed to be due. However, the Commissioner is authorized to charge and/or credit Deposit Account No. 50-1133 for any additional fees and/or overpayment.

Respectfully submitted,

McDERMOTT, WILL & EMERY

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Date: September 12, 2002

## AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): **M. Martinelli et al**

**Docket No.**

**56300-036 (MRTK-1RECON)**

Serial No.  
09/494,213

Filing Date

SEP 17 2002

Examiner  
Shaw, S.J.

**Group Art Unit  
3737**

## **METHOD AND SYSTEM FOR NAVIGATION A CATHETER PROBE**

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12 -	47 =	0	x \$18.00	\$0.00
INDEP. CLAIMS	6 -	12 =	0	x \$84.00	\$0.00
Multiple Dependent Claims (check if applicable)	<input type="checkbox"/>				\$0.00
		TOTAL ADDITIONAL FEE FOR THIS AMENDMENT			\$0.00

No additional fee is required for amendment.

Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1133  
A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 CFR 1.17.

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Dated: September 12, 2002

***Signature***

I certify that this document and fee is being deposited on 9/12/02 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

***Signature of Person Mailing Correspondence***

*Typed or Printed Name of Person Mailing Correspondence*

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